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Bib Data Sheet

CONFIRMATION NO. 2397

SERIAL NUMBER 10/673,600	FILING DATE 09/29/2003 RULE	CLASS 360	GROUP ART UNIT 2651	ATTORNEY DOCKET NO. HSJ920030184US1
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APPLICANTS

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** CONTINUING DATA *NA*

** FOREIGN APPLICATIONS *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 12/30/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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TITLE
 System and apparatus for assembly level disk erase

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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